FREDERICK COUNTY ETHICS COMMISSION

c/o Office of the County Attorney
Winchester Hall
12 East Church Street
Frederick, Maryland 21701
fcec@FrederickCountyMD.gov

ETHICS COMPLAINT FORM

Instructions:

- Please type or print the information requested.
- Use of this form is not mandatory, but all of the information requested below should be provided when a complaint is made.
- Anonymous complaints are not accepted.

<u>Information about the Complainant</u>:

Work: _____

- The Ethics Ordinance is found in Chapter 1-7.1 of the County Code of Ordinances. A link to the Ordinance is provided on the Ethics Commission's website.
- Additional information about the procedures for resolving complaints may be found in the Ethics Commission's Standard Operating Procedures, which are also on the Ethics Commission's website.
- Decisions on complaints are generally issued within 90 days of receipt of the complaint.
- ➤ The Ethics Commission only has the jurisdiction to consider violations of the specific provisions of the Ethics Ordinance. General allegations that conduct is "unethical" cannot be considered unless the conduct would constitute a violation of the Ordinance itself.

Name of person making the complaint: Address: Email address: Telephone number(s): Home:

Preferred method of communication:
Information about the complaint:
Provide the specific provision of the Ethics Ordinance that you believe has been violated:
Name of official or employee who is the subject of the complaint:
Describe the facts and circumstances that support the complaint. (Provide as much detail as possible. Attach additional pages if necessary.)
Attach any relevant records in your possession or control that you want the Ethics Commission to

consider in reviewing your complaint.

Witnesses:

Identify any	witnesses	who have	personal	knowledge	of the	facts	and	circumstances	related	to	the
complaint:											

1.	Name:	
	Address:	
	Email address:	
	Telephone number(s):	
	Relevant information:	
2.	Name:	
	Address:	
	Email address:	
	Telephone number(s):	
	Relevant information:	
3.	Name:	
	Address:	
	Email address:	
	Telephone number(s):	
	Relevant information:	

I hereby affirm under the penalty	of perjury that the contents of this complain	it, including any
attachments, are true and correct to	the best of my knowledge, information and belief.	
Complainant's Signature	Data	-
Complainant's Signature	Date	